

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation Planned Parenthood Action PAC North Carolina			
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 100 S. Boylan Ave			
(c) City, State and ZIP Code Raleigh NC 27603			3. FEC Identification Number <div> <div>C</div> <div>C90016767</div> </div>
2. Occupation and Name of Employer (for Individual Filers Only)			

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report

☐ July 15 Quarterly Report ☐ 24-Hour Report

☐ October 15 Quarterly Report ☒ 48-Hour Report

☐ January 31 Year-End Report

b) Is this Report an amendment? ☒ No ☐ Yes, it amends the report filed on / /

5. COVERING PERIOD:

FROM / /

THROUGH / /

6. TOTAL CONTRIBUTIONS.....

7. TOTAL INDEPENDENT EXPENDITURES

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE _____

[Electronically Filed]

Nancy, Long, , ,

Nancy, Long, , ,

10/25/2016

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

SCHEDULE 5-A **ITEMIZED RECEIPTS**

PAGE 2 OF 4

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF FILER (In Full)
Planned Parenthood Action PAC North Carolina

A. Full Name (Last, First, Middle Initial) Planned Parenthood Action Fund, Inc			Date of Receipt <div> <div>MM / DD / YYYY</div> <div>09 / 23 / 2016</div> </div>	
Mailing Address 434 W 33rd St #12			Transaction ID : F56.000001	
City	State	Zip Code	Amount of Each Receipt this Period <div> <div>500000.00</div> </div>	
New York	NY	10001		
FEC ID number of contributing federal political committee.				
<div>C</div>				
Name of Employer			Occupation	

B. Full Name (Last, First, Middle Initial) Planned Parenthood Action Fund, Inc			Date of Receipt <div> <div>MM / DD / YYYY</div> <div>10 / 06 / 2016</div> </div>	
Mailing Address 434 W 33rd St #12			Transaction ID : F56.000002	
City	State	Zip Code	Amount of Each Receipt this Period <div> <div>500000.00</div> </div>	
New York	NY	10001		
FEC ID number of contributing federal political committee.				
<div>C</div>				
Name of Employer			Occupation	

C. Full Name (Last, First, Middle Initial)			Date of Receipt <div> <div>MM / DD / YYYY</div> </div>	
Mailing Address				
City	State	Zip Code	Amount of Each Receipt this Period <div> </div>	
FEC ID number of contributing federal political committee.				
<div>C</div>				
Name of Employer			Occupation	

D. Full Name (Last, First, Middle Initial)			Date of Receipt <div> <div>MM / DD / YYYY</div> </div>	
Mailing Address				
City	State	Zip Code	Amount of Each Receipt this Period <div> </div>	
FEC ID number of contributing federal political committee.				
<div>C</div>				
Name of Employer			Occupation	

SUBTOTAL of Receipts This Page (optional)	1000000.00
TOTAL This Period (last page carry total to Line 6)	1000000.00

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 3 OF 4
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Planned Parenthood Action PAC North Carolina

Full Name (Last, First, Middle Initial) of Payee
Community Outreach Group, LLC

Mailing Address 1110 Vermont Ave NW Ste 300

City State Zip Code
Washington DC 20005

Date of Public Distribution/Dissemination

MM / DD / YYYY
10 / 11 / 2016

Amount

25991.45

Transaction ID : F57.000001

Purpose of Expenditure
Paid CanvassCategory/
Type 007Office Sought: ☐ House State: NC
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Ross, Deborah, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 25991.45Disbursement For: ☐ Primary ☒ General
2016 ☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
Mack-Sumner Communications, LLC

Mailing Address 2001 N Beauregard St Ste 420

City State Zip Code
Alexandria VA 22311

Date of Public Distribution/Dissemination

MM / DD / YYYY
10 / 11 / 2016

Amount

3847.50

Transaction ID : F57.000002

Purpose of Expenditure
Door HangersCategory/
Type 006Office Sought: ☐ House State: NC
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Ross, Deborah, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 29838.95Disbursement For: ☐ Primary ☒ General
2016 ☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
Community Outreach Group, LLC

Mailing Address 1110 Vermont Ave NW Ste 300

City State Zip Code
Washington DC 20005

Date of Public Distribution/Dissemination

MM / DD / YYYY
10 / 11 / 2016

Amount

25991.45

Transaction ID : F57.000003

Purpose of Expenditure
Paid CanvassCategory/
Type 007Office Sought: ☐ House State: NC
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Burr, Richard, , ,Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 25991.45Disbursement For: ☐ Primary ☒ General
2016 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 55830.40

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures.....▶
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 4 OF 4
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Planned Parenthood Action PAC North Carolina

Full Name (Last, First, Middle Initial) of Payee
Mack-Sumner Communications, LLC

Mailing Address 2001 N Beauregard St Ste 420

City State Zip Code
Alexandria VA 22311

Date of Public Distribution/Dissemination

MM / DD / YYYY
10 / 11 / 2016

Amount

3847.50

Transaction ID : F57.000004

Purpose of Expenditure
Door HangersCategory/
Type 006Office Sought: ☐ House State: NC
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Burr, Richard, , ,Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 29838.95Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Mailing Address

City State Zip Code

Date of Public Distribution/Dissemination

MM / DD / YYYY

Amount

Purpose of Expenditure

Category/
TypeOffice Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Mailing Address

City State Zip Code

Date of Public Distribution/Dissemination

MM / DD / YYYY

Amount

Purpose of Expenditure

Category/
TypeOffice Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 3847.50

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶ 59677.90
(carry total from last page forward to Line 7)